

## OHIO TRAFFIC CRASH REPORT

OH-1 (Rev. 1-82)

LOCAL REPORT NO. 14-3508		<input type="checkbox"/> OH-2 <input type="checkbox"/> OH-3		Lebanon Police		0830300		ODHS USE ONLY - 00 NOT MARK ABOVE		LOCAL FILE NO.	
REPORT TAKEN	<input checked="" type="checkbox"/> AT STATION <input type="checkbox"/> AT SCENE	NO OF VEH PEDESTRIANS INVOLVED	2		CRASH SEVERITY (CHECK MOST SEVERE) <input type="checkbox"/> FATAL <input type="checkbox"/> INJURY <input checked="" type="checkbox"/> PROPERTY DAMAGE ONLY		COMBINED VEH/PROP LOSS	<input checked="" type="checkbox"/> OVER \$150 <input type="checkbox"/> UNDER \$150	HIT SKIP	<input type="checkbox"/> SOLVED <input type="checkbox"/> UNSOLVED	
IN COUNTY OF WARREN		IN <input checked="" type="checkbox"/> CITY		LEBANON		DATE OF CRASH: 02   18   14		DAY TUES		TIME MILITARY 1959	
CRASH OCCURRED ON 596 Columbus Ave, Lebanon, Oh 45036						WITHIN THE INTERSECTION OF					
IF NOT IN INTERSECTION						(LIST NEAREST INTERSECTING STREET, MILEPOST, HOUSE NO.)				CITY CODE 8321	
LOG-1		LOG-2		LOC JUR FH9 FILT							
A	UNIT NO.	NO OF OCCUPANTS		OPERATING <input checked="" type="checkbox"/> PARKED <input type="checkbox"/> DRIVERLESS <input type="checkbox"/> HIT & RUN NON CONTACT <input type="checkbox"/>		INSURANCE CO OR AGENT		None E			
DRIVER-PEDESTRIAN NAME (LAST, FIRST, MI) Collins, John						ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 110 Walnut Place, Springboro, Oh 45066					
PHONE NO. 937-546-1727		BIRTH DATE m     y		AGE 		SEX 		SOCIAL SECURITY NO. 07/05/1967		STATE OH	
OWNER (IF SAME AS DRIVER, WRITE SAME) Same		ADDRESS		PHONE							
VEH YR	MAKE	MODEL		COLOR		STYLE		STATE		LICENSE PLATE NO.	
	Chevy			White		P/U		OH		FZB3673	
CIRCLE DAMAGE AREAS		9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER		DAMAGE SEVERITY <input checked="" type="checkbox"/> NON-FUNCTIONAL <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING		DAMAGE SCALE <input type="checkbox"/> NONE <input type="checkbox"/> MODERATE <input checked="" type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY		VEHICLE DISPOSITION <input checked="" type="checkbox"/> DRIVEN AWAY <input type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED		FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE	
8	UNIT NO.	NO OF OCCUPANTS		OPERATING <input checked="" type="checkbox"/> PARKED <input type="checkbox"/> DRIVERLESS <input type="checkbox"/> HIT & RUN NON CONTACT <input type="checkbox"/>		INSURANCE CO OR AGENT		All State			
DRIVER/PEDESTRIAN NAME (LAST, FIRST, MI) Orkies, Paula						ADDRESS (NO., STREET, CITY, STATE, ZIP CODE) 904 Stanwood Dr, Lebanon, Oh					
PHONE NO. 513-933-9717		BIRTH DATE m   D   y		AGE 		SEX 		SOCIAL SECURITY NO.		STATE OH	
OWNER (IF SAME AS DRIVER, WRITE SAME) Same		ADDRESS		PHONE							
VEH YR	MAKE	MODEL		COLOR		STYLE		STATE		LICENSE PLATE NO.	
2000	Mitsubishi	Galant						OH		BC01WK	
CIRCLE DAMAGE AREAS		9 TOP 10 UNDER CAR 11 LOAD 12 TRAILER		DAMAGE SEVERITY <input checked="" type="checkbox"/> NON-FUNCTIONAL <input type="checkbox"/> FUNCTIONAL <input type="checkbox"/> DISABLING		DAMAGE SCALE <input type="checkbox"/> NONE <input checked="" type="checkbox"/> MODERATE <input type="checkbox"/> LIGHT <input type="checkbox"/> HEAVY		VEHICLE DISPOSITION <input checked="" type="checkbox"/> DRIVEN AWAY <input type="checkbox"/> REMAINED AT SCENE <input type="checkbox"/> TOWED		FIRE <input checked="" type="checkbox"/> NO FIRE <input type="checkbox"/> FIRE DUE TO CRASH <input type="checkbox"/> OTHER FIRE	
C	FROM UNIT NO.	NAME (LAST, FIRST, MI)		BIRTH DATE m   D   y		AGE		POSITION		INJURIES	
		ADDRESS		PHONE		SEX		A 1 B 1 C D E F		A 5 B 5 C D E F	
D	FROM UNIT NO.	NAME (LAST, FIRST, MI)		BIRTH DATE m   D   y		AGE		SEX		SEX	
		ADDRESS		PHONE		SEX		SEX		SEX	
E	FROM UNIT NO.	NAME (LAST, FIRST, MI)		BIRTH DATE m   D   y		AGE		SEX		SEX	
		ADDRESS		PHONE		SEX		SEX		SEX	
F	FROM UNIT NO.	NAME (LAST, FIRST, MI)		BIRTH DATE m   D   y		AGE		SEX		SEX	
		ADDRESS		PHONE		SEX		SEX		SEX	
A B C		INJURED TAKEN TO		By		A B C D E F		A B C D E F		ALCOHOL	
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LOCAL REPORT NO.	DESCRIBE WHAT HAPPENED REFER TO UNITS BY NUMBER	Unit # 1 back into Unit # 2 that was parked at the gas pumps. Moderate Damage.

<b>WEATHER</b> 1 NO ADVERSE WEATHER 2 RAIN 3 SNOW 4 FOG 5 HIGH WIND 6 OTHER	<b>FIRST HARMFUL EVENT</b> 7	SHOW NORTH WITH ARROW 
<b>ROAD CONDITIONS</b> 1 DRY 2 WET 3 SNOW 4 ICE 5 DIRT/SAND 6 OTHER	<b>TWO MV IN TRANSPORT</b> 1 HEAD ON 2 REAR-END 3 BACKING 4 SIDESWIPE MEETING 5 SIDESWIPE PASSING 6 ANGLE	
<b>LIGHT</b> 1 DAYLIGHT 2 DAWN 3 DUSK 4 DARK NO LIGHTS 5 DARK-LIGHTED 6 OTHER	<b>ONE MV IN TRANSPORT (COLLISION)</b> 7 PARKED MOTOR VEH 8 PEDESTRIAN 9 ANIMAL 10 TRAIN 11 PEDALCYCLE 12 OTHER NON-M V 13 FIXED OBJECT 14 OTHER OBJECT (NON-COLLISION)	
<b>ROAD CONTOUR</b> 1 STRAIGHT LEVEL 2 STRAIGHT GRADE 3 CURVE LEVEL 4 CURVE GRADE	<b>LOCATION</b> 15 FALL FROM OR IN VEH 16 OVERTURNING 17 OTHER NON-COLLIS	
<b>OCCURRENCE</b> 1 ON ROADWAY 2 OFF LEFT SIDE 3 OFF RIGHT SIDE 4 ON OPPOSING LANE OF A DIVIDED HIGHWAY	<b>SPECIAL AREA</b> 1 ROAD CONSTRUCTION 2 MAINTENANCE AREA 3 SCHOOL ZONE	
<b>SPECIAL AREA</b> 1 ROAD CONSTRUCTION 2 MAINTENANCE AREA 3 SCHOOL ZONE	<b>RAMP LETTER CODE</b>	

Vehicles moved  
Speedway Parking Lot

TYPE OF UNIT	# 1	A	5	# 2	5	3	PRE-CRASH ACTIONS	A	B	10	9	CONTRIBUTING FACTOR -	A	B	10	9
<b>CAR</b> 1 SUB-COMPACT 2 COMPACT 3 MID SIZE 4 FULL SIZE <b>TRUCK</b> 5 PICKUP 6 PANEL/VAN 7 STRAIGHT TRUCK 8 STRAIGHT TRUCK AND TRAILER 9 TRUCK TRACTOR 10 TRACTOR & SEMI-TRAILER 11 TRACTOR & DOUBLE TRAILER <b>MOTORCYCLE</b> 12 MC UP TO 350CC 13 MC351CC TO 750CC 14 MC OVER 751CC IS MOTORIZED BICYCLE	<b>Bus</b> 16 SCHOOL 17 CHURCH 18 PUBLIC BUS <b>EMERGENCY</b> 19 POLICE VEHICLE 20 FIRE TRUCK 21 AMBULANCE/RESCUE <b>OTHER</b> 22 TAXI 23 MOTOR HOME 24 TRAIN 25 FARM VEHICLE 26 FARM EQUIPMENT 27 SNOWMOBILE 28 CONSTRUCTION EQUIP 29 ANIMAL W/RIDER 30 ANIMAL W/BUGGY 31 BICYCLE 32 ALL OTHERS P = PEDESTRIAN	<b>DRIVER ACTIONS</b> 1 GOING STRAIGHT 2 TURNING RIGHT 3 TURNING LEFT 4 TURNING ON RED LIGHT 5 U TURN 6 STOPPED TO TURN 7 STOPPED IN TRAFFIC 8 PARKING/UNPARKING 9 PARKED 10 BACKING 11 PASSING 12 CHANGING LANES 13 MERGING/EXITING 14 OUT OF CONTROL 15 SWERVING 16 DRIVERLESS VEH 17 OTHER DRV ACTIONS	<b>PEDESTRIAN ACTIONS</b> 18 CROSSING IN X-WALK 19 CROSSING OTHER THAN X-WALK 20 WALKING IN ROAD (WITH TRAFFIC) 21 WALKING IN ROAD (AGAINST TRAFFIC) 22 PLAYING IN ROAD 23 WORKING ON ROAD 24 ENTERING OR LEAVING VEHICLE 25 PUSHING/WORKING ON VEH IN ROAD 26 OTHER IN ROAD 27 ON SIDEWALK OR SHOULDER	<b>DRIVER ERROR</b> 1 NONE 2 FAILURE TO YIELD 3 UNSAFE SPEED 4 FOLLOWING TOO CLOSELY OR ACDA 5 RAN RED LIGHT 6 RAN STOP OR YIELD SIGN 7 IMPROPER TURN 8 IMPROPER PASSING 9 IMPROPER LANE CHANGE 10 IMPROPER BACKING 11 IMPROPER START FROM PARKED POSITION 12 STOPPED OR PARKED ILLEGALLY 13 LEFT OF CENTER 14 FAILURE TO CONTROL 15 DRIVER INATTENTION 16 DROVE OFF ROAD 17 REASON UNKNOWN 17 OTHER DRIVER ERROR	<b>NON-DRIVER FACTOR</b> 18 VEHICLE DEFECTS 19 LOAD SHIFTING 20 FALLING SPILLING 21 PAVEMENT DEFECT 22 SHOULDER DEFECT 23 DEBRIS ON ROAD 24 DOWNED TRAFFIC SIGN/DEVICE 25 VISION OBSTRUCTION 26 ANIMAL ACTIONS 26 PEDESTRIAN ACTIONS	<b>VEHICLE DEFECTS</b> CODE IF CONTRIBUTING FACTOR IS 18 PRIMARY SECONDARY										
<b>SPEED</b> UNIT EST. LEGAL A B B	<b>MC HELMET USE</b> UNIT DRIVER PASS A B B	<b>DRIVER</b> 1 NO CONTROLS 2 STOP SIGN 3 YIELD SIGN 4 TRAFFIC SIGNAL 5 TRAFFIC FLASHERS 6 SCHOOL ZONE 7 RAILROAD CROSSBUCKS 8 RAILROAD FLASHERS 9 RAILROAD GATES 10 CONSTR BARRICADES 11 POLICE OFFICER 12 PAVEMENT MARKINGS 13 OTHER <b>PEDESTRIAN</b> 14 NO CONTROLS 15 CROSSWALK LINES 16 WALK/DON'T WALK DEVICE	<b>FIXED OBJECT STRUCK</b> 1 NONE 2 UTILITY POLE 3 TRAFFIC SIGN 4 BRIDGE/CULVERT 5 GUARD RAIL 6 FENCE 7 TREE 8 SHRUBBERY 9 CURB 10 DITCH 11 EMBANKMENT 12 BUILDING 13 MAIL BOX 14 CONSTRUCTION BARRICADE 15 FIRE HYDRANT 16 OTHER OBJECT	<b>TRUCK LOAD</b> 1 EMPTY 2 PERISHABLE GOODS 3 GENERAL FREIGHT 4 METAL/HEAVY MACHINERY 5 HAZARDOUS GAS 6 HAZARDOUS LIQUID 7 HAZARDOUS SOLID 8 RADIOACTIVE MATERIAL	<b>TRUCK AXLES</b> A B	<b>TRACTOR-TRAILER RIGS</b>										

PLEASE CHECK TO SEE THAT ALL BOXES ARE CLEAR ENOUGH TO BE MICROFILMED